

Healthy Iowans 2017-2021

Iowa's Health Improvement Plan



Healthy Living

REVISED August 2019



Coordinated by the
Bureau of Public Health Performance
Iowa Department of Public Health



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FOCUS AREA: Healthy Living

What Health Issues Are Included

Obesity, Nutrition, & Physical Activity
Lack of Oral Health/Dental Services
Sexually Transmitted Diseases

Healthy Living Measures of Health Improvement

HL-1 Decrease ↓ the percentage of people who are overweight.

<u>WIC children ages 2 to 4</u>	<u>WIC children, Hispanic</u>	
Target: 16%	Target: 17%	
Baseline: 17% [2014]	Baseline: 19% [2014]	
<u>Adults 18+ (BMI 25.0 to 29.9) ☹</u>	<u>Adults 18-24 ☹</u>	<u>Adults Male 18+ ☹</u>
Target: 34%	Target: 25%	Target: 40%
Baseline: 37% [2016]	Baseline: 26.4% [2016]	Baseline: 42% [2016]
Newest: 34% [2017]≈8%↓ decrease	Newest: 25.7% [2017]≈2%↓ decrease	Newest: 38% [2017]≈10%↓ decrease

Data Source: CDC, National Center for Chronic Disease Prevention and Health Promotion, Division of Nutrition, Physical Activity, and Obesity. Data, Trend and Maps [online]. <https://www.cdc.gov/nccdphp/dnpao/data-trends-maps/index.html>

<u>Children & Adolescents (ages 10-17) ☹</u>
Target: 11%
Baseline: 12% [2016]
Newest: 14% [2017]≈10%↑ increase

Data Source: Child and Adolescent Health Measurement Initiative www.cahmi.org. Data Resource Center for Child and Adolescent Health. National Survey of Children's Health (NSCH). National Outcome Measure #20. <https://www.childhealthdata.org/browse/survey>

HL-2 Decrease ↓ the percentage of people who are obese.

<u>WIC children ages 2 to 4</u>	<u>WIC children, Hispanic</u>	<u>WIC children, Am. Indian/Alaska Native</u>
Target: 13%	Target: 19%	Target: 17%
Baseline: 15% [2014]	Baseline: 20% [2014]	Baseline: 19% [2014]
<u>Adults 18+ (BMI > 30) ☹</u>	<u>Adults with Disability* ☹</u>	
Target: 30%	Target: 38%	
Baseline: 32% [2016]	Baseline: 41% [2016]	
Newest: 36% [2017]≈14%↑ increase	Newest: 45% [2017]≈10%↑ increase	

Data Source: CDC, National Center for Chronic Disease Prevention and Health Promotion, Division of Nutrition, Physical Activity, and Obesity. Data, Trend and Maps [online]. <https://www.cdc.gov/nccdphp/dnpao/data-trends-maps/index.html> *Additional IDPH analysis of national BRFSS data.

<u>Children & Adolescents (ages 10-17) ☹</u>
Target: 16%
Baseline: 17.5% [2016]
Newest: 17.7% [2017]≈1%↑ increase

Data Source: Child and Adolescent Health Measurement Initiative www.cahmi.org. Data Resource Center for Child and Adolescent Health. National Survey of Children's Health (NSCH). National Outcome Measure #20. <https://www.childhealthdata.org/browse/survey>

HL-3 Increase ↑ the percentage of infants who are breastfed.

<u>Infants, ever breastfed ☹</u>	<u>Infants, breastfed at 6 months ☹</u>	<u>Infants, breastfed at 12 months ☹</u>
Target: 87%	Target: 56%	Target: 31%
Baseline: 83% [2014]	Baseline: 53% [2014]	Baseline: 29% [2014]
Newest: 82% [2015]≈1%↓ decrease	Newest: 51% [2015]≈4%↓ decrease	Newest: 30% [2015]≈4%↑ increase

Data Source: CDC, National Center for Chronic Disease Prevention and Health Promotion, Division of Nutrition, Physical Activity, and Obesity. Data, Trend and Maps [online]. <https://www.cdc.gov/nccdphp/dnpao/data-trends-maps/index.html>

HL-4 Decrease ↓ the percentage of Iowans who are food insecure.Overall ☺

Target: 11%

Baseline: 12% [2015]

Newest: 11.5% [2016]≈4%↓ decrease

Children ☺

Target: 15%

Baseline: 17% [2015]

Newest: 16% [2016]≈5%↓ decrease

Data Source: Feeding America. Map the Meal Gap. <https://map.feedingamerica.org/>Adults ages 60+ ☺

Target: 10%

Baseline: 11% [2014-2015]

Newest: 10% [2015-2016]≈7%↓ decrease

Data Source: Feeding America. The State of Senior Hunger in America.

<https://www.feedingamerica.org/research/senior-hunger-research/senior>**HL-5** Increase ↑ the percentage of adults who eat fruits and/or vegetables five or more times per day.Overall ☺

Target: 15%

Baseline: 13.5% [2015]

Newest: 16% [2017]≈21%↑ increase

Male ☺

Target: 10%

Baseline: 9% [2015]

Newest: 13% [2017]≈47%↑ increase

Data Source: Iowa Behavioral Risk Factor Surveillance System (BRFSS). <https://idph.iowa.gov/brfss>**HL-6** Increase ↑ the percentage of adults who eat fruit at least one time per day.Overall ☺

Target: 62%

Baseline: 58% [2015]

Newest: 64% [2017]≈11%↑ increase

Male ☺

Target: 55%

Baseline: 52% [2015]

Newest: 60% [2017]≈15%↑ increase

Black, non-Hispanic ☺

Target: 51%

Baseline: 48% [2015]

Newest: 63% [2017]≈32%↑ increase

Ages 18-24 ☺

Target: 58%

Baseline: 55% [2015]

Newest: 62% [2017]≈11%↑ increase

Ages 25-34 ☺

Target: 60%

Baseline: 57% [2015]

Newest: 65% [2017]≈14%↑ increase

Ages 35-44 ☺

Target: 54%

Baseline: 51% [2015]

Newest: 62% [2017]≈21%↑ increase

Ages 45-54 ☺

Target: 57%

Baseline: 54% [2015]

Newest: 60% [2017]≈12%↑ increase

Income less than \$15,000 ☺

Target: 52%

Baseline: 49% [2015]

Newest: 57% [2017]≈15%↑ increase

Income \$15,000-\$24,999 ☺

Target: 57%

Baseline: 54% [2015]

Newest: 60% [2017]≈12%↑ increase

Data Source: CDC, National Center for Chronic Disease Prevention and Health Promotion, Division of Nutrition, Physical Activity, and Obesity. Data, Trend and Maps [online]. <https://www.cdc.gov/nccdphp/dnpao/data-trends-maps/index.html>**HL-7** Increase ↑ the percentage of adults who eat vegetables at least one time per day.Overall ☺

Target: 77%

Baseline: 73% [2015]

Newest: 81% [2017]≈10%↑ increase

Male ☺

Target: 72%

Baseline: 69% [2015]

Newest: 78% [2017]≈13%↑ increase

Ages 18-24 ☺

Target: 69%

Baseline: 65% [2015]

Newest: 74% [2017]≈14%↑ increase

Income less than \$15,000 ☺

Target: 72%

Baseline: 68% [2015]

Newest: 73% [2017]≈7%↑ increase

Income \$15,000-\$24,999 ☺

Target: 71%

Baseline: 67% [2015]

Newest: 78% [2017]≈16%↑ increase

Data Source: CDC, National Center for Chronic Disease Prevention and Health Promotion, Division of Nutrition, Physical Activity, and Obesity. Data, Trend and Maps [online]. <https://www.cdc.gov/nccdphp/dnpao/data-trends-maps/index.html>

HL-8 Increase ↑ the percentage of children and adolescents who were physically active at least 60 minutes per day every day in the last week.

<u>Children, ages 6-11 ☺</u>	<u>Female children ☺</u>	<u>Adolescents, ages 12-17 ☺</u>
Target: 28%	Target: 22%	Target: 27%
Baseline: 26% [2016]	Baseline: 20.5% [2016]	Baseline: 25% [2016]
Newest: 30% [2017]~17%↑ increase	Newest: 26% [2017]~28%↑ increase	Newest: 19% [2017]~24%↓ decrease

Data Source: Child and Adolescent Health Measurement Initiative www.cahmi.org. Data Resource Center for Child and Adolescent Health. National Survey of Children's Health (NSCH). National Performance Measure #8. <https://www.childhealthdata.org/browse/survey>

HL-9 Increase ↑ the percentage of adults engaged in any physical activity for exercise during the past month.

<u>Overall ☺</u>	<u>Income less than \$15,000 ☺</u>	<u>Income \$15,000 to \$24,999 ☺</u>
Target: 82%	Target: 68%	Target: 71%
Baseline: 77% [2016]	Baseline: 64% [2016]	Baseline: 67% [2016]
Newest: 75% [2017]~3%↓ decrease	Newest: 67% [2017]~5%↑ increase	Newest: 70% [2017]~5%↑ increase
<u>Income \$25,000 to \$34,999 ☺</u>	<u>Income \$35,000 to \$49,999 ☺</u>	<u>Adults with Disability* ☺</u>
Target: 75%	Target: 79%	Target: 66%
Baseline: 70.5% [2016]	Baseline: 75% [2016]	Baseline: 62% [2016]
Newest: 69% [2017]~2%↓ decrease	Newest: 72% [2017]~4%↓ decrease	Newest: 63% [2017]~2%↑ increase

Data Source: CDC, National Center for Chronic Disease Prevention and Health Promotion, Division of Population Health. BRFSS Prevalence & Trends Data. <https://www.cdc.gov/brfss/brfssprevalence> *Additional IDPH analysis of national BRFSS data.

HL-10 Increase ↑ the percentage of adults meeting aerobic physical activity guidelines.*

<u>Overall ☺</u>	<u>Income less than \$15,000 ☺</u>	<u>Income \$15,000 to \$24,999 ☺</u>
Target: 52%	Target: 40%	Target: 46%
Baseline: 49% [2015]	Baseline: 37% [2015]	Baseline: 43% [2015]
Newest: 50% [2017]~3%↑ increase	Newest: 41% [2017]~10%↑ increase	Newest: 46% [2017]~6%↑ increase
<u>Income \$25,000 to \$34,999 ☺</u>	<u>Income \$35,000 to \$49,999 ☺</u>	<u>Hispanic ☺</u>
Target: 47%	Target: 45%	Target: 38%
Baseline: 45% [2015]	Baseline: 43% [2015]	Baseline: 35% [2015]
Newest: 47% [2017]~4%↑ increase	Newest: 45% [2017]~5%↑ increase	Newest: 43% [2017]~22%↑ increase
<u>Adults with Disability** ☺</u>		
Target: 39%		
Baseline: 37% [2015]		
Newest: 40% [2017]~10%↑ increase		

Data Source: CDC, National Center for Chronic Disease Prevention and Health Promotion, Division of Nutrition, Physical Activity, and Obesity. Data, Trend and Maps [online]. <https://www.cdc.gov/nccdphp/dnpao/data-trends-maps/index.html>

*Percent of adults who achieve at least 150 minutes a week of moderate-intensity aerobic physical activity or 75 minutes a week of vigorous-intensity aerobic physical activity. **Additional IDPH analysis of national BRFSS data.

HL-11 Increase ↑ the percentage of adults meeting muscle strengthening physical activity guidelines.*

<u>Overall ☺</u>	<u>Income less than \$15,000 ☺</u>	<u>Income \$15,000 to \$24,999 ☺</u>
Target: 32%	Target: 27%	Target: 27%
Baseline: 30% [2015]	Baseline: 26% [2015]	Baseline: 25% [2015]
Newest: 29% [2017]~3%↓ decrease	Newest: 23% [2017]~9%↓ decrease	Newest: 22% [2017]~10%↓ decrease
<u>Income \$25,000 to \$34,999 ☺</u>	<u>Ages 55-64 ☺</u>	<u>Ages 65+ ☺</u>
Target: 24%	Target: 26%	Target: 22%
Baseline: 22% [2015]	Baseline: 24% [2015]	Baseline: 21% [2015]
Newest: 27% [2017]~24%↑ increase	Newest: 21% [2017]~11%↓ decrease	Newest: 22% [2017]~5%↑ increase
<u>Adults with Disability** ☺</u>		
Target: 24%		
Baseline: 22% [2015]		
Newest: 22% [2017]~0%↔ no change		

Data Source: CDC, National Center for Chronic Disease Prevention and Health Promotion, Division of Nutrition, Physical Activity, and Obesity. Data, Trend and Maps [online]. <https://www.cdc.gov/nccdphp/dnpao/data-trends-maps/index.html> *Percent of adults who engage in muscle-strengthening activities on two or more days a week. **Additional IDPH analysis of national BRFSS data.

HL-12 Increase ↑ the percentage of the population with adequate access to locations for physical activity.*

Target: 88%
Baseline: 83% [2016]

Data Source: Business Analyst, Delorme map data, ESRI, & US Census Tigerline Files. Courtesy: University of Wisconsin Population Health Institute, *County Health Rankings* online. Health Factors, Health Behaviors measures: Access to Exercise Opportunities. <https://www.countyhealthrankings.org/> *Percent of the population who live reasonably close to a location for physical activity, i.e., parks or recreational facilities.

HL-13 Increase ↑ the percentage of children whose teeth are in excellent or very good condition.

<u>Overall (ages 1-17) ☹</u>	<u>Income less than 200% of poverty ☹</u>
Target: 88%	Target: 80%
Baseline: 84% [2016]	Baseline: 75% [2016]
Newest: 81% [2017]≈3%↓ decrease	Newest: 71% [2017]≈6%↓ decrease

Data Source: Child and Adolescent Health Measurement Initiative www.cahmi.org. Data Resource Center for Child and Adolescent Health. National Survey of Children's Health. Indicator 1.2. <https://www.childhealthdata.org/browse/survey>

HL-14 Increase ↑ the number of dentists per 100,000 population.

Target: 68
Baseline: 64 [2016]

Data Source: US DHHS, Health Resources and Services Administration, Area Health Resource File. Courtesy: University of Wisconsin Population Health Institute, *County Health Rankings*. Rankings Data & Documentation, National Data & Documentation. <https://www.countyhealthrankings.org/>

HL-15 Increase ↑ the percentage of children and adolescents who had a preventive dental visit in the past year.

<u>Overall, ages 1-17 ☺</u>	<u>Ages 1-5 ☺</u>	<u>Income less than 200% of poverty ☺</u>
Target: 86%	Target: 63%	Target: 79%
Baseline: 82% [2016]	Baseline: 59% [2016]	Baseline: 75% [2016]
Newest: 85% [2017]≈4%↑ increase	Newest: 65% [2017]≈10%↑ increase	Newest: 81% [2017]≈8%↑ increase

Data Source: Child and Adolescent Health Measurement Initiative www.cahmi.org. Data Resource Center for Child and Adolescent Health. National Survey of Children's Health (NSCH). National Performance Measure #13B. <https://www.childhealthdata.org/browse/survey>

HL-16 Increase ↑ the percentage of women who receive a dental cleaning during their pregnancy.

<u>Overall ☹</u>	<u>Income less than 185% of poverty ☹</u>
Target: 64%	Target: 53%
Baseline: 60% [2015]	Baseline: 50% [2015]
Newest: 56% [2016]≈8%↓ decrease	Newest: 45% [2016]≈9%↓ decrease

Data Source: Iowa Department of Public Health. Pregnancy Risk Assessment Monitoring System (PRAMS). *2016 Data Frequencies Report* (overall) and unpublished data (income). <https://idph.iowa.gov/prams/publications>

HL-17 Increase ↑ the percentage of adults who have had a dental visit in the last year.

<u>Overall</u>	<u>Male</u>	<u>Black, non-Hispanic</u>
Target: 75%	Target: 72%	Target: 65%
Baseline: 71% [2016]	Baseline: 68% [2016]	Baseline: 62% [2016]
<u>Asian, non-Hispanic</u>	<u>Income less than \$15,000</u>	<u>Income \$15,000-\$24,999</u>
Target: 57%	Target: 50%	Target: 59%
Baseline: 54% [2016]	Baseline: 48% [2016]	Baseline: 55% [2016]
<u>Income \$25,000-\$34,999</u>	<u>Income \$35,000-\$49,999</u>	<u>Adults with Disability*</u>
Target: 66%	Target: 74%	Target: 65%
Baseline: 62% [2016]	Baseline: 70% [2016]	Baseline: 62% [2016]

Data Source: CDC, National Center for Chronic Disease Prevention and Health Promotion, Division of Population Health. BRFSS Prevalence & Trends Data. <https://www.cdc.gov/brfss/brfssprevalence> *Additional IDPH analysis of national BRFSS data. Data is available in even numbered years.

HL-18 Decrease ↓ the rate of sexually transmitted diseases (per 100,000 population).Chlamydia Overall ☹

Target: 394

Baseline: 416 [2016]

Newest: 467 [2018]≈12%↑ increase

American Indian/Alaska Native females ages 15-24 ☹

Target: 4,743

Baseline: 4,994 [2016]

Newest: 3,801 [2018]≈24%↓ decrease

Females, ages 15-24 ☹

Target: 2,680

Baseline: 2,822 [2016]

Newest: 3,112 [2018]≈10%↑ increase

Black/African American females ages 15-24 ☹

Target: 10,123

Baseline: 10,647 [2016]

Newest: 11,462 [2018]≈8%↑ increase

Gonorrhea Overall ☹

Target: 79

Baseline: 83 [2016]

Newest: 154 [2018]≈85%↑ increase

American Indian/Alaska Native ☹

Target: 432

Baseline: 455 [2016]

Newest: 716 [2018]≈57%↑ increase

Black/African American ☹

Target: 690

Baseline: 726 [2016]

Newest: 1,202 [2018]≈65%↑ increase

Primary, Secondary & Early Latent Syphilis Overall ☹

Target: 4

Baseline: 4.7 [2016]

Newest: 5.4 [2018]≈14%↑ increase

Male ☹

Target: 8

Baseline: 8.7 [2016]

Newest: 9.3 [2018]≈7%↑ increase

Data Source: Iowa Department of Public Health, STD Program. <https://idph.iowa.gov/hivstdhep/std/resources>

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Iowa Health Issue: Obesity, Nutrition & Physical Activity

Iowa Counties with Local Strategies

Adair, Allamakee, Appanoose, Benton, Black Hawk, Boone, Buchanan, Calhoun, Cedar, Cerro Gordo, Cherokee, Chickasaw, Clarke, Clayton, Clinton, Dallas, Decatur, Delaware, Des Moines, Dubuque, Emmet, Fayette, Franklin, Fremont, Greene, Grundy, Henry, Humboldt, Iowa, Jackson, Jones, Kossuth, Lee, Linn, Louisa, Lucas, Lyon, Mahaska, Mills, Mitchell, Monona, Monroe, Montgomery, Page, Palo Alto, Plymouth, Pocahontas, Pottawattamie, Poweshiek, Sac, Scott, Shelby, Sioux, Story, Tama, Union, Van Buren, Wapello, Warren, Washington, Webster, Winnebago, Winneshiek, Woodbury, Worth

These community health improvement plans are available on the Iowa Department of Public Health, Community Health Needs Assessment and Health Improvement Planning (CHNA&HIP) website: <https://idph.iowa.gov/chnahip/health-improvement-plans>

Goals, Objectives & Strategies

Obesity, Nutrition & Physical Activity

Goal #1 Increase the number of Iowans who engage in the recommended amounts of physical activity.

Alignment with National Plans

Healthy People 2020, Leading Health Indicators Topics, Nutrition, Physical Activity, & Obesity

<https://www.healthypeople.gov/2020/leading-health-indicators/2020-lhi-topics/Nutrition-Physical-Activity-and-Obesity>

Million Hearts Initiative <https://millionhearts.hhs.gov>

Healthy People 2020, Physical Activity <http://www.healthypeople.gov/2020/topics-objectives/topic/physical-activity>

FM 7-22 CH 1 (Army Physical Readiness Training), 3 May 2013; AR 600-9 (The Army Body Composition Program), 28 June 2013

Alignment with State / Other Plans

State Innovation Model, Statewide Strategy Plans, Obesity <https://idph.iowa.gov/SIM>

2022 Iowa Million Heart State Action Plan <https://idph.iowa.gov/hdsp/state-plan>

Obesity, Nutrition & Physical Activity

Objective 1-1 Increase the percentage of adults meeting aerobic physical activity guidelines.

Baseline Year	Baseline Value	Target Year	Target Value
2015	49%	2021	52%

Data Source & Location: Health in Iowa: Annual Report from the Behavioral Risk Factor Surveillance System <https://idph.iowa.gov/brfss>

Obesity, Nutrition & Physical Activity

Strategy 1-1.1 Increase the number of 5-2-1-0 registered sites.

Strategy Type

Professional/provider-focused

Strategy Source & Location

Iowa Healthiest State Initiative <http://www.iowahealthieststate.com/>

Who's Responsible

Healthiest State Initiative

Target Date

Dec 31, 2019

Obesity, Nutrition & Physical Activity

Strategy 1-1.2 Increase the number of complete street policies in Iowa.

Strategy Type

Policy-focused

Strategy Source & Location

Smart Growth America

<https://www.smartgrowthamerica.org/app/legacy/documents/cs/policy/cs-policyelements.pdf>

Who's Responsible
Iowa Department of Public Health, American Heart Association

Target Date
Jul 1, 2020

Obesity, Nutrition & Physical Activity

Strategy 1-1.3 Increase the percent of Expanded Food and Nutrition Program and Supplemental Nutrition Assistance Program (EFNEP and SNAP-Ed) adults reporting increasing minutes of physical activity.

Strategy Type
Demographic/socioeconomic-focused

Strategy Source & Location

Iowa State University Extension and Outreach 2014-2018 Work Plan

Who's Responsible
Iowa State University Extension and Outreach Human Sciences Professionals

Target Date
Sep 30, 2021

Obesity, Nutrition & Physical Activity

Strategy 1-1.4 Improve Iowa child-care environments by encouraging providers to participate in NAP-SACC (Nutrition and Physical Activity Self-Assessment for Child Care).

Strategy Type
Professional/provider-focused

Strategy Source & Location

<https://gonapsacc.org>

Who's Responsible
American Heart Association, Iowa Department of Public Health, United Way of Central Iowa, Well Kids Coalition, YMCA

Target Date
Jul 1, 2020

Obesity, Nutrition & Physical Activity

Strategy 1-1.5 Support the Iowa Department of Education in the implementation of the Physical Education and Health Standards.

Strategy Type
Professional/provider-focused

Strategy Source & Location

Iowa Department of Education <https://educateiowa.gov/pk-12/instruction/physical-education>

Who's Responsible
Iowa Department of Public Health, American Heart Association, Iowa Association for Health, Physical Education, Recreation and Dance (IAHPERD)

Target Date
Dec 31, 2019

Obesity, Nutrition & Physical Activity

Objective 1-2 Reduce the annual number of soldiers who are flagged in the Iowa Army National Guard (IA ARNG) for not passing the Army's physical fitness standards by 20% from 886 (2018) to 709 by 2020.

Baseline Year	Baseline Value	Target Year	Target Value
2018	886	2020	709

Data Source & Location
Unit Personnel System/Command Management System, JFHQ.

Obesity, Nutrition & Physical Activity

Strategy 1-2.1 Assign one health promotion non-commissioned officer/officer to be trained by special staff on healthy eating/nutrition, physical fitness, leadership, and additional resources.

Strategy Type
Professional/provider-focused

Strategy Source & Location

Lean in '19: (published) Lean in '20 campaign under review, awaiting approval

Who's Responsible
Unit commanders identify individuals, IA ARNG Physical Resilience Working Group provides training

Target Date
Oct 1, 2019

Obesity, Nutrition & Physical Activity

Strategy 1-2.2 Assist soldiers in creating diet and physical fitness logs/ plans, following up on progress and adjusting plans as needed.

Strategy Type

Individual/interpersonal-focused

Strategy Source & Location

Lean in '19: (published) Lean in '20 campaign under review, awaiting approval

Who's Responsible

Commanders supported by Health Promotion Officers/Physical Resilience Working Group

Target Date

Oct 1, 2019

Obesity, Nutrition & Physical Activity

Strategy 1-2.3 Hold quarterly meetings for the Adjutant General's Health Promotion Council and brief senior leaders on direction and guidance to the Physical Resilience Working Group.

Strategy Type

Professional/provider-focused

Strategy Source & Location

Army Regulation 600-63 Army Health Promotion, JFHQ (unpublished)

Who's Responsible

State Health Promotion Officer/ Physical Resilience Working Group

Target Date

Oct 1, 2019

Obesity, Nutrition & Physical Activity

Goal #2 Increase the number of Iowans eating a healthy diet.

Alignment with National Plans

Healthy People 2020, Nutrition & Weight Status

<https://www.healthypeople.gov/2020/topics-objectives/topic/nutrition-and-weight-status>

Healthy People 2020, Maternal Infant & Child Health

<https://www.healthypeople.gov/2020/topics-objectives/topic/maternal-infant-and-child-health>

Alignment with State / Other Plans

State Innovation Model, Statewide Strategy Plans, Obesity <https://idph.iowa.gov/SIM>

Iowa State Plan on Aging <https://www.iowaaging.gov/about-iowa-department-aging>

Obesity, Nutrition & Physical Activity

Objective 2-1 Increase the number of Iowa adults who consume fruits (F) and vegetables (V) at least once per day.

Baseline
Year

2015

Baseline
Value

F: 58%
V: 73%

Target
Year

2021

Target
Value

F: 62%
V: 77%

Data Source & Location | Health in Iowa: Annual Report from the Behavioral Risk Factor Surveillance System <https://idph.iowa.gov/brfss>

Obesity, Nutrition & Physical Activity

Strategy 2-1.1 Increase the number of 5-2-1-0 registered sites.

Strategy Type

Professional/provider-focused

Strategy Source & Location

Iowa Healthiest State Initiative <http://www.iowahealthieststate.com/>

<u>Who's Responsible</u> Iowa Healthiest State Initiative		<u>Target Date</u> Dec 31, 2019
<u>Obesity, Nutrition & Physical Activity</u>		
Strategy 2-1.2	Increase availability of the Double Up Food Bucks (DUFB) at farmers' markets.	<u>Strategy Type</u> Community-focused
<u>Strategy Source & Location</u> Iowa Healthiest State Initiative http://www.iowahealthieststate.com/		
<u>Who's Responsible</u> Iowa Healthiest State Initiative and Community Farmers Markets		<u>Target Date</u> Dec 31, 2019
<u>Obesity, Nutrition & Physical Activity</u>		
Strategy 2-1.3	Improve Iowa child-care environments by encouraging providers to participate in NAP-SACC.	<u>Strategy Type</u> Professional/provider-focused
<u>Strategy Source & Location</u> https://gonapsacc.org		
<u>Who's Responsible</u> American Heart Association, Iowa Department of Public Health, United Way of Central Iowa, Well Kids Coalition, YMCA		<u>Target Date</u> Jul 1, 2020
<u>Obesity, Nutrition & Physical Activity</u>		
Strategy 2-1.4	Increase the number of children that participate in the Supplemental Nutrition Assistance Program Education (SNAP-Ed).	<u>Strategy Type</u> Individual/interpersonal-focused
<u>Strategy Source & Location</u> SNAP-Ed Education and Administrative Reporting System (EARS) Form (unpublished data)		
<u>Who's Responsible</u> Iowa Department of Public Health, Iowa Nutrition Network (INN) - ISU Extension, school districts, public health agencies, and community action agencies		<u>Target Date</u> Dec 31, 2021
<u>Obesity, Nutrition & Physical Activity</u>		
Strategy 2-1.5	Provide the Pick a better snack social marketing campaign using multiple channels to the Iowa Nutrition Network School Grant Program communities.	<u>Strategy Type</u> Individual/interpersonal-focused
<u>Strategy Source & Location</u> Iowa Nutrition Network - SNAP-Ed funded initiative https://idph.iowa.gov/inn/school-grants		
<u>Who's Responsible</u> Iowa Department of Public Health, Iowa Nutrition Network (INN) - ISU Extension, school districts, public health agencies, and community action agencies		<u>Target Date</u> Dec 31, 2021
<u>Obesity, Nutrition & Physical Activity</u>		
Strategy 2-1.6	Increase the consumption of fruits and vegetables in high nutrition-risk congregate meal participants.	<u>Strategy Type</u> Individual/interpersonal-focused
<u>Strategy Source & Location</u> Iowa Department on Aging Social Assistance Management Software (SAMS) database		
<u>Who's Responsible</u> Iowa Department on Aging and Iowa Department of Public Health		<u>Target Date</u> Dec 31, 2021

Obesity, Nutrition & Physical Activity**Objective 2-2** By 2021 achieve a redemption rate of 75% of fruit and vegetable dollars (Cash Value Benefits - CVBs).

Baseline Year	Baseline Value	Target Year	Target Value
2015	68%	2021	75%

Data Source & Location | WIC MIS System reports (unpublished)

Obesity, Nutrition & Physical Activity**Strategy 2-2.1** Promote and educate WIC participants on how to choose, store, and cook fruits and vegetables purchased with the CVB by participating in media campaigns, partnering with ISU Extension, and promoting the completion of appropriate lessons and eKitchen videos in WICHealth.org.Strategy Type

Individual/interpersonal-focused

Strategy Source & Location

Iowa Department of Public Health, WIC Program

Who's Responsible

WIC Director and Nutrition Consultants, Iowa Department of Public Health

Target Date

Dec 31, 2021

Obesity, Nutrition & Physical Activity**Objective 2-3** Increase the percent of participants in Iowa State University Extension and Outreach training who apply what they have learned about healthy behaviors.

Baseline Year	Baseline Value	Target Year	Target Value
2015	60%	2021	65%

Data Source & Location | Iowa State University Extension and Outreach

Obesity, Nutrition & Physical Activity**Strategy 2-3.1** Increase the percent of childcare training participants reporting preparedness to apply or teach health promoting dietary behaviors.Strategy Type

Professional/provider-focused

Strategy Source & Location

Iowa State University Extension and Outreach 2014-2018 Work Plan

Who's Responsible

Iowa State University Extension and Outreach Human Sciences Professionals

Target Date

Sep 30, 2021

Obesity, Nutrition & Physical Activity**Strategy 2-3.2** Increase the percent of Expanded Food and Nutrition Program and Supplemental Nutrition Assistance Program (EFNEP and SNAP-Ed) adults reporting increasing fruit and vegetable intake.Strategy Type

Demographic/socioeconomic-focused

Strategy Source & Location

Iowa State University Extension and Outreach 2014-2018 Work Plan

Who's Responsible

Iowa State University Extension and Outreach Human Sciences Professionals

Target Date

Sep 30, 2021

Obesity, Nutrition & Physical Activity**Objective 2-4** Increase the number of summer meal sites by 12% from 504 (2016) to 565 by 2021.

Baseline Year	Baseline Value	Target Year	Target Value
2016	504	2021	565

Data Source & Location | Iowa Department of Education, Bureau of Nutrition & Health Services Summer Food Service Program (SFSP) Sponsor Application
<https://www.educateiowa.gov/documents/summer-food-service-program/2016/06/2016-open-feeding-sites-county>

Obesity, Nutrition & Physical Activity

Strategy 2-4.1 Identify areas of unserved need and organizations serving the area including schools and non-profit organizations and facilitate collaboration. **Strategy Type**
Community-focused

Strategy Source & Location

SFSP Participation and Application, Iowa Department of Education, Bureau of Nutrition and Health Services
<https://www.educateiowa.gov/documents/summer-food-service-program/2016/06/2016-open-feeding-sites-county>

Who's Responsible

Iowa Department of Education, SFSP Education Program Consultant

Target Date

Sep 1, 2021

Obesity, Nutrition & Physical Activity

Strategy 2-4.2 Support currently participating organizations via education, technical assistance, sharing best practices, and identifying new resources to retain organization sponsorship of SFSP sites. **Strategy Type**
Professional/provider-focused

Strategy Source & Location

SFSP Participation and Application, Iowa Department of Education, Bureau of Nutrition and Health Services
<https://www.educateiowa.gov/documents/summer-food-service-program/2016/06/2016-open-feeding-sites-county>

Who's Responsible

Iowa Department of Education, SFSP Education Program Consultant

Target Date

Sep 1, 2021

Obesity, Nutrition & Physical Activity

Objective 2-5	Increase breastfeeding rate including initiation, exclusivity and duration among Iowa women. (Ever breastfed, Breastfed at 6 months (6M), Breastfed at 12 months (12M), exclusive breastfeeding through 3 months (3Mx), exclusive breastfeeding through 6 months (6Mx)	Baseline Year	Baseline Value	Target Year	Target Value
		2014	Ever: 83% 6M: 53% 12 M: 29% 3Mx: 43% 6Mx: 26%	2021	Ever: 87% 6M: 56% 12M: 31% 3Mx: 46% 6Mx: 28%

Data Source & Location Breastfeeding Among U.S. Children Born 2009–2016 by State, National Immunization Survey, Centers for Disease Control and Prevention, Department of Health and Human Services.
https://www.cdc.gov/breastfeeding/data/nis_data/results.html

Obesity, Nutrition & Physical Activity

Strategy 2-5.1 Develop or enhance partnerships between the local WIC programs/WIC Breastfeeding Peer Counseling Programs and local hospitals. **Strategy Type**
Professional/provider-focused

Strategy Source & Location

WIC Nutrition Services Standards <https://wicworks.fns.usda.gov/wicworks/Topics/WICnutStand.pdf>

Who's Responsible

Iowa Department of Public Health Breastfeeding Program

Target Date

Dec 31, 2019

Obesity, Nutrition & Physical Activity

Strategy 2-5.2 Provide education and training to early care and education providers in best practices for supporting breastfeeding. **Strategy Type**
Professional/provider-focused

Strategy Source & Location

Iowa Department of Public Health, Bureau of Nutrition and Physical Activity

Who's Responsible

Iowa Department of Public Health

Target Date

Dec 31, 2019

Iowa Health Issue: Oral Health

Iowa Counties with Local Strategies

Clarke, Greene, Henry, Lee, Montgomery, Webster

These community health improvement plans are available on the Iowa Department of Public Health, Community Health Needs Assessment and Health Improvement Planning (CHNA&HIP) website: <https://idph.iowa.gov/chnahip/health-improvement-plans>

Goals, Objectives & Strategies

Oral Health

Goal #1 All Iowans will have access to optimally fluoridated water.

Alignment with National Plans

Healthy People 2020, Oral Health, Objective 13 <https://www.healthypeople.gov/2020/topics-objectives/topic/oral-health>

Alignment with State / Other Plans

Iowa Oral Health Plan 2016-2020 <http://idph.iowa.gov/ohds/oral-health-center/reports>

Oral Health

Objective 1-1	Increase the percent of Iowans served by community water systems that have access to optimally fluoridated water (based on 0.7ppm proposed national standard) from 91% to 94%.	Baseline Year	Baseline Value	Target Year	Target Value
		2016	91%	2021	94%

Data Source : Water Fluoridation Reporting System (WFRS)
& Location : https://nccd.cdc.gov/DOH_MWF/Default/Default.aspx

Oral Health

Strategy 1-1.1 Launch a fluoridation education and outreach effort so that every child in Iowa through age 12 who lives in households with incomes below 300% of poverty level will be cavity-free.

Strategy Type

Individual/interpersonal-focused

Strategy Source & Location

Delta Dental of Iowa Strategic Plan

<https://www.deltadentalia.com/foundation/strategic-goals>

Who's Responsible

Delta Dental of Iowa Foundation

Target Date

Jan 1, 2020

Oral Health

Strategy 1-1.2 Provide information and educational materials to health care providers, the general public, water professionals, and Iowans for Oral Health Coalition related to the safety, effectiveness, and cost effectiveness of water fluoridation.

Strategy Type

Community-focused

Strategy Source & Location

Iowa Oral Health Plan 2016-2020

Who's Responsible

Iowa Department of Public Health

Target Date

Jan 1, 2020

Oral Health

Strategy 1-1.3 Assess and monitor the fluoridation status of Iowa community water systems.

Strategy Type

Demographic/socioeconomic-focused

Strategy Source & Location

Iowa Oral Health Plan 2016-2020

Who's Responsible

Iowa Department of Public Health

Target Date

Jan 1, 2020

Oral Health**Goal #2** By 2020, assure optimal oral health for aging Iowans.Alignment with National PlansHealthy People 2020, Oral Health, Objectives 3-2 & 3-3 <https://www.healthypeople.gov/2020/topics-objectives/topic/oral-health>Alignment with State / Other PlansIowa Oral Health Plan 2016-2020 <https://idph.iowa.gov/ohds/oral-health-center/reports>Oral Health**Objective 2-1** Increase access to oral health education and services for aging Iowans by a trained and qualified workforce.Baseline
Year

2016

Baseline
Value

TBD

Target
Year

2020

Target
Value

TBD

Data Source & Location | To be developed.

Oral Health**Strategy 2-1.1** Support licensed dental hygienists performing educational and oral screening services and provide increased opportunities for them to teach direct care workers and other health providers.Strategy Type
Policy-focusedStrategy Source & Location

New strategy

Who's Responsible

Iowa Caregivers

Target Date

Dec 31, 2019

Oral Health**Strategy 2-1.2** Continue the grant of Oral Health Education for Direct Caregivers (OHEDC).Strategy Type
Policy-focusedStrategy Source & Location

Iowa Oral Health Plan 2016-2020

Who's Responsible

Iowa CareGivers

Target Date

Dec 31, 2019

Oral Health**Strategy 2-1.3** Increase awareness of Prepare to Care training including specialty endorsements such as Oral Health/Mouth Care Matters.Strategy Type
Professional/provider-focusedStrategy Source & Location

Iowa Oral Health Plan 2016-2020

Oral Health

Goal #3 Iowans will have improved access to preventive oral health services through I-Smile™ Program expansion.

Alignment with National Plans

Healthy People 2020, Oral Health <https://www.healthypeople.gov/2020/topics-objectives/topic/oral-health>

Alignment with State / Other Plans

Iowa Oral Health Plan 2016-2020 <http://idph.iowa.gov/ohds/oral-health-center/reports>

Oral Health

Objective 3-1	Increase the percent of 3rd grade children who have at least one sealant on a permanent first molar from 59.4% to 70%.	Baseline Year	Baseline Value	Target Year	Target Value
		2016	59.4%	2021	70%

Data Source & Location: 2016 Iowa Third Grade Oral Health Survey Report
<http://idph.iowa.gov/ohds/oral-health-center/reports>

Oral Health

Strategy 3-1.1 Provide technical assistance and training to local I-Smile™ school contractors. **Strategy Type** Professional/provider-focused

Strategy Source & Location

Iowa Oral Health Plan 2016-2020

Who's Responsible

Iowa Department of Public Health

Target Date

Jan 1, 2020

Oral Health

Strategy 3-1.2 Work with partners to promote the I-Smile™ @ School Program and dental sealants for children. **Strategy Type** Community-focused

Strategy Source & Location

Iowa Oral Health Plan 2016-2020

Who's Responsible

Iowa Department of Public Health

Target Date

Jan 1, 2020

Oral Health

Objective 3-2	Increase the percent of Medicaid-enrolled children ages 0-2 who receive a dental service from 35.3% to 45.3%.	Baseline Year	Baseline Value	Target Year	Target Value
		2015	35.3%	2021	45.3%

Data Source & Location: CMS 416 report <http://idph.iowa.gov/ohds/oral-health-center/reports>

Oral Health

Strategy 3-2.1 Provide technical assistance and training to local I-Smile™ contractors. **Strategy Type** Professional/provider-focused

Strategy Source & Location

I-Smile program plan, Iowa Department of Public Health

Who's Responsible

Iowa Department of Public Health

Target Date

Jan 1, 2020

Oral Health**Strategy 3-2.2** Work with partners to promote the I-Smile Program and early and regular care for children.Strategy Type

Community-focused

Strategy Source & Location

I-Smile program plan, Iowa Department of Public Health

Who's Responsible

Iowa Department of Public Health

Target Date

Jan 1, 2020

Oral Health**Objective 3-3** Increase the percent of older Iowans who visited a dentist in the past year from 72% to 75% for ages 65-74 and from 68% to 70% for ages 75 and over.Baseline
Year

2014

Baseline
Value72%
(65-74)
68% (75+)Target
Year

2021

Target
Value75%
(65-74)
70% (75+)Data Source & Location Health in Iowa: Annual Report from the Behavioral Risk Factor Surveillance System <http://idph.iowa.gov/brfss>Oral Health**Strategy 3-3.1** Provide technical assistance and training to local I-Smile™ Silver contractors.Strategy Type

Professional/provider-focused

Strategy Source & Location

Iowa Oral Health Plan 2016-2020

Who's Responsible

Iowa Department of Public Health

Target Date

Jan 1, 2021

Oral Health**Strategy 3-3.2** Work with Lifelong Smiles Coalition and other partners to promote and expand the I-Smile™ Silver Program.Strategy Type

Community-focused

Strategy Source & Location

Iowa Oral Health Plan 2016-2020

Who's Responsible

Iowa Department of Public Health, Delta Dental of Iowa Foundation

Target Date

Jan 1, 2020

Iowa Health Issue: Sexually Transmitted Diseases (STD)

Iowa Counties with Local Strategies

Buchanan, Calhoun, Grundy, Iowa, Linn, Louisa, Marshall, Page, Pottawattamie, Webster

These community health improvement plans are available on the Iowa Department of Public Health, Community Health Needs Assessment and Health Improvement Planning (CHNA&HIP) website: <https://idph.iowa.gov/chnahip/health-improvement-plans>

Goals, Objectives & Strategies

Sexually Transmitted Diseases (STD)

Goal #1 Reduce the burden of sexually transmitted diseases (STD) among disproportionately impacted populations.

Alignment with National Plans

National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention (NCHHSTP) Strategic Plan
<https://www.cdc.gov/nchhstp/strategicpriorities/>

Alignment with State / Other Plans

Iowa's work plan for Improving Sexually Transmitted Disease Programs through Assessment, Assurance, Policy Development, and Prevention Strategies (STD AAPPs) <https://idph.iowa.gov/Portals/1/Files/HIVSTDHEP/Final%20Narrative%203-22.pdf>

Sexually Transmitted Diseases (STD)

Objective 1-1	By 2021, increase the percentage of sexually active females ages 16-24 who are screened at least annually for chlamydia to 60% using the HEDIS measure.	Baseline Year	Baseline Value	Target Year	Target Value
		2014	37%	2021	60%

Data Source & Location: Centers for Disease Control and Prevention. Chlamydia Screening Percentages Reported by Commercial and Medicaid Plans by State and Year. <https://www.cdc.gov/std/chlamydia/chlamydia-screening-2014.htm>

Sexually Transmitted Diseases (STD)

Strategy 1-1.1	Work with medical organizations across the state to ensure providers are aware of chlamydia screening recommendations and the chlamydia HEDIS measure and adhering to them via distribution of materials, holding forums, and other educational opportunities related to testing, treatment, and risk reduction associated chlamydia.	Strategy Type
		Professional/provider-focused

Strategy Source & Location

Improving Sexually Transmitted Disease Programs through Assessment, Assurance, Policy Development, and Prevention Strategies (STD AAPPs) at <http://www.cdc.gov/std/foa/aapps/> and Iowa's STD AAPPs work plan.

Who's Responsible

Iowa Department of Public Health, Bureau of HIV, STD, and Hepatitis

Target Date

Dec 31, 2021

Sexually Transmitted Diseases (STD)

Objective 1-2	By 2021, decrease the rate of gonorrhea among black, non-Hispanic persons in Iowa to 300 per 100,000 population.	Baseline Year	Baseline Value	Target Year	Target Value
		2014	586	2021	300

Data Source & Location: National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention (NCHHSTP) atlas
<http://gis.cdc.gov/grasp/nchhstpatlas/main.html?value=atlas>

Iowa Department of Public Health, STD Program disease surveillance data
<http://idph.iowa.gov/hivstdhep/std/resources>

Sexually Transmitted Diseases (STD)

Strategy 1-2.1	Increase outreach to populations disproportionately impacted by gonorrhea in Iowa, including Black, non-Hispanic populations, to increase awareness and ensure access to testing and treatment services, as well as prevention and risk reduction options.	<u>Strategy Type</u>
		Community-focused
	<u>Strategy Source & Location</u>	
	Community-Based Screening Services (CBSS) program for STD testing and treatment	
	<u>Who's Responsible</u>	
	Iowa Department of Public Health, Bureau of HIV, STD, and Hepatitis	

Sexually Transmitted Diseases (STD)

Objective 1-3	By 2021, reduce the rate of infectious syphilis to 2.0 per 100,000 population.	Baseline Year	Baseline Value	Target Year	Target Value
		2014	5.6	2021	2.0
Data Source & Location	National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention (NCHHSTP) atlas http://gis.cdc.gov/grasp/nchhstpatlas/main.html?value=atlas Iowa Department of Public Health, STD Program disease surveillance data http://idph.iowa.gov/hivstdhep/std/resources				

Sexually Transmitted Diseases (STD)

Strategy 1-3.1	Increase outreach to populations disproportionately impacted by syphilis in Iowa, including men who have sex with men (MSM) populations, to increase awareness and ensure access to testing and treatment services, as well as prevention and risk reduction options.	<u>Strategy Type</u>	
		Community-focused	
		<u>Strategy Source & Location</u>	
	Community-Based Screening Services (CBSS) program for STD testing and treatment; HIV prevention and care programs		
	<u>Who's Responsible</u>	<u>Target Date</u>	
	Iowa Department of Public Health, Bureau of HIV, STD, and Hepatitis	Dec 31, 2021	

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